

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 MAR -8 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N37205

1. Corporation Name

PENINSULA AFFORDABLE HOUSING INC.

2. Principal Office Address

7203 N.FLORIDA AVE.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.
NA

Suite, Apt. #, etc.

City & State

TAMPA, FL.

City & State

Zip
33604

Country
USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

3-19-90

5. FEI Number

593 138 292

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

EUGENE L. LEBEUF

100003851991-3

-03/14/01--01016--027

Street Address (P.O. Box Number is Not Acceptable)

901 W. MAHONEY ST.

****306.25 ****306.25

Suite, Apt. #, Etc.

City

PLANT CITY

REINSTATEMENT

State

FL

Zip Code

33566

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Eugene L. LeBeuf
REGISTERED AGENT MUST SIGN

Date

3-06-01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	ALBRITTON, ROBERT	5430 PROCTOR RD.	SARACOTA, FL. 34233
VPD	IVES, ALAN B.	268 BARBADOS DR.	JUPITER, FL. 33458
SD	FORNEY, RICHARD M.	1489 W. PALMETTO PK. RD. 3RD FL	BOCA RATON, FL. 33486
VPD	MARTIN, CHARLES, R. JR.	9330 ADAMO DR.	TAMPA, FL. 33619
ED	LEBEUF, EUGENE L.	901 W. MAHONEY ST.	PLANT CITY, FL. 33566

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

EUGENE L. LEBEUF
Eugene L. LeBeuf
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
EXEC. DIR.

3-06-01
Date

(813) 754-6652
Daytime Phone #

CR2E081 (9/00)